

ASPE RESEARCH BRIEF

OFFICE OF THE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION
OFFICE OF HUMAN SERVICES POLICY - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

ALTERNATIVE RESPONSES TO CHILD MALTREATMENT: FINDINGS FROM NCANDS

Child protective services (CPS) agencies face a large volume of reports, complex cases, and strained resources. Because of their belief that many CPS reports do not require a traditional investigative response, some States have developed practices and policies to differentiate how cases are handled. Investigations are typically aimed at determining whether the alleged child maltreatment occurred, or whether there is a risk for maltreatment, and putting in place an appropriate intervention. In contrast, alternative responses emphasize the assessment of the family's needs and provision of services to prevent future maltreatment, but without the need to determine whether specific allegations can be substantiated. State policies on alternative response vary, although typically families are approached as a unit, and given options about services and assistance, with a focus on the well-being of the entire family. Although not universally true for all States, the service philosophy is to build on the family's strengths, while ensuring that needs for children's safety are being met.

This research examined case-level data reported to the National Child Abuse and Neglect Data System (NCANDS) by six States—Kentucky, Minnesota, Missouri, New Jersey, Oklahoma, and Wyoming—that offered both alternative response and traditional investigation. Case characteristics, circumstances of reports, and outcomes were examined for 313,838 children, of whom 140,072 received an alternative response during 2002. The objective of this study was to compare the children in each State who were referred to alternative response systems with those referred to traditional investigations. Key findings include the following:

- The extent to which these six States made use of alternative responses varied widely. During 2002, the proportion of cases referred to alternative response ranged from 20 to 71 percent.
- The implementation of an alternative response system appears to reflect its intention – to serve children and families with less immediate safety concerns or who present less serious allegations of child maltreatment.
- The introduction of an alternative response system affected the number of child maltreatment victims and nonvictims identified. Alternative response systems resulted in decreased victim identification ranging from a 6 percent decrease (in a State with a pilot program) to a 36 percent decrease. In five of the States studied, alternative response systems also resulted in a decrease in the number of children identified as nonvictims (ranging from 18% to 57%). However, in Oklahoma the number of nonvictims rose by 30 percent.

ABOUT THIS RESEARCH BRIEF

This Research Brief presents findings from an analysis of child abuse and neglect reports for six states that use both traditional child maltreatment investigations and some other defined action that does not require a specific finding about whether the maltreatment occurred. Several states have recently begun using these systems, referred to in this study as “alternative responses,” in an effort to differentiate among cases in which the often confrontational nature of investigations is helpful and those for which a more assessment oriented approach may be more constructive. The analysis described here was conducted by staff of Walter R. McDonald and Associates under contract to ASPE and in cooperation with the Administration for Children and Families.

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- The connection between maltreatment type and referral to alternative response in each State was strong, but varied across States. For two States in this study—Missouri and Wyoming—all children referred to alternative response had the same maltreatment characteristics. In Missouri, all were children with no reported maltreatment. In other circumstances these reports might have been screened out, or referred to other agencies. In Wyoming, all had been reported for “other” forms of abuse, i.e. not the four types of maltreatment referred to in federal statutes: abuse, neglect, sexual abuse or emotional maltreatment. “Other” forms of abuse and neglect recognized by states vary, but may include, for instance, educational neglect and medical neglect. In the other States—Kentucky, Minnesota, New Jersey, and Oklahoma—a portion of children with all different maltreatment types were referred to alternative response. Only in New Jersey were significant numbers of children who were reported to be sexually abused referred to alternative response.
- Older children were more likely to receive an alternative response than younger children. Race and ethnicity did not differ significantly between children who received an alternative response and those who received an investigation.
- Alternative response more often resulted from referrals from parents, relatives, friends, schools, or the children themselves. Referrals from social workers, medical personnel, legal, or criminal justice sources were less likely to be referred to alternative response.

These analyses of child, report, and maltreatment characteristics suggest that States are implementing their alternative response systems somewhat differently. Some of this may be due to the stage and scope of implementation in each State. Other explanations may include the degree to which policies clearly specify how the response assignment is made. Some discretion by individual caseworkers is likely responsible for much of the variation between alternative response and investigations, as much as client and report characteristics. State demographics and availability of resources may also factor in the decisions made and outcomes observed.

It appears that services are being provided to a greater proportion of families who receive an alternative response than to children who are the subject of an investigation. It also appears that even though children who had been previously referred to alternative response do experience subsequent reports and responses by CPS, they are not generally at any greater risk for subsequent reports than those who received an investigation. Furthermore, they are not at greater risk for subsequent victimization. With this knowledge, at the system level, agencies that refer children and families to the alternative response or investigation track may be confident that, if guidelines direct the decision, the child’s future safety is no more likely to be compromised.

Clearly, many factors influence the processes and outcomes of alternative response systems, and it may be helpful to examine more closely the interaction between these factors. This study provides a more textured understanding than has been available previously of alternative response systems across States and the outcomes associated with families and children who benefit from such systems.

A copy of the full report is available at <http://aspe.hhs.gov/hsp/05/child-maltreat-resp/>.